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## BIB DATA SHEET

CONFIRMATION NO. 6679

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO. END5007USNP		
10/732,843	12/10/2003	600	3736			
<b>APPLICANTS</b> Chris Ciconas, Columbus, OH; Luke Stonis, Columbus, OH; Beth McCombs, Sharon, MA;						
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/432,546 12/11/2002						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 03/16/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /H.Q. NGUYEN/ Acknowledged Examiner's signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWINGS</b> 9	<b>TOTAL CLAIMS</b> <del>20</del> 19	<b>INDEPENDENT CLAIMS</b> <del>3</del> 4
<b>ADDRESS</b> PHILIP S. JOHNSON JOHNSON & JOHNSON ONE JOHNSON & JOHNSON PLAZA NEW BRUNSWICK, NJ 08933-7003 UNITED STATES						
<b>TITLE</b> BIOPSY DEVICE WITH SAMPLE TUBE						
<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			